

# **DPAC Board Meeting**

## **8/22/07**

### **Meeting Summary**

Attendance: Jose Saraiva, Ann Scott, Richard Wimberley, Micki Juip, Peter Dews, Jean Chickering, Anne Esdale, Carol Callaghan, Sally Joy, Ann Constance, Gloria Palmisano, Ed Stein, Judith Claytor, Tiana Ramos-Gee, James Brown, Kristi Pier, Daniel Diepenhorst, Leslie Biskup-Ahmad

The meeting began at 10:15am with a welcome from the co-chairs, Peter Dews and Micki Juip, followed by an introduction of all the Board members. The co-chairs then asked the Board members to do a **SWOT analysis** of DPAC (see Attachment 1 for details).

Kristi Pier reviewed the plan for writing the updated **Michigan Diabetes Plan**. Board members suggested some changes, notably to write the document as an action plan, with doable outcomes and objectives.

#### Workgroup reports:

Training and Education Programs Workgroup—Gloria Palmisano: The workgroup has been meeting regularly since the May meeting. They continue to work on the establishment of diabetes community health workers within the community. The workgroup developed a presentation about use and education of diabetes community health workers. The presentation is in the final stages of completion, and will be shared shortly with the full DPAC membership (possibly at the October meeting).

Communications and Public Awareness Workgroup—Leslie Biskup-Ahmad: The Communications and Public Awareness workgroup reviewed and submitted changes for the updated DPAC website (which should be ready for prior to Oct. 24<sup>th</sup> meeting). The workgroup completed and distributed the first DPAC newsletter, which was well received. Leslie encouraged other workgroups to submit items for future newsletters and the new “hot” link for the new DPAC website.

Advocacy and Policy Workgroup—Sally Joy: The Advocacy workgroup completed two articles about the DSMT programs. These articles will be sent to a list of health care provider organizations in the state. The article is ready for publication in provider newsletters. Sally asked members to review the organization list and submit additional recipients for the mailing. The workgroup submitted a policy brief in January to the Governor’s office for full diabetes coverage in the Michigan First plan. The workgroup will begin preparing for Advocacy Day, which is in April 2008.

Data, Evaluation and Research Workgroup—(update from Kristi Pier): The workgroup is completing a PowerPoint presentation for Michigan-specific diabetes data. This should be complete and available for members at the October meeting.

Membership Group—Micki Juip: The member list is complete and an assessment is needed as a first step in developing a plan to recruit new DPAC members. All DPAC members will need to be involved in the plan to be effective. Micki announced that she will be stepping down as co-chair, so there is a need for a new co-chair of the Membership Committee.

(reports were not submitted for the Prevention Workgroup or the Governance Committee)

The May 14, 2007 DPAC full member **meeting evaluation summary** was reviewed. Overall members said the meeting was useful. The members again said they wanted more time to network.

Board members reviewed and made suggested changes for the **agenda** to the upcoming Full Membership Meeting on October 24. The diabetes community health worker presentation will be added, with Gloria or another REACH representative presenting. The NDEP Prevention presentation was removed.

The members spent the remaining time reviewing and selecting a possible slogan or **phrase** to use when promoting DPAC. The primary goal of the phrase is to prevent or control diabetes, with a secondary goal of increasing awareness of DPAC. The audience is the general public. The agreed upon phrase is: “Who’s in control? You or your diabetes?” Time did not allow for a discussion of next steps or a plan for dissemination, and will therefore be completed at a later date.

Board members received certificates of appreciation for the time and effort contributed to DPAC in the last year.

The meeting concluded at 3:00pm. The next Full Member Meeting is October 24, 2007, at the Henry Center in Lansing. Next Board meeting to be announced at a later date.

## **DPAC SWOT Analysis—Attachment 1**

Feedback and comments from Board members at August 22, 2007 meeting. (not edited)

### **Strengths**

- Only statewide gathering of DM reps
- Freedom to exchange ideas
- Membership w/ diabetes focus, expertise and passion
- Diverse membership
- Michigan focused
- New structure increasing activities w/ in workgroups
- Few meetings
- Common venues for discussing items/issues of mutual concerns
- Consumer representation
- Volunteerism
- History of survival
- Dedication of staff and board
- History of collaboration
- Uniqueness – mission/vision
- Ability to convey message about diabetes

### **Weaknesses**

- Role ambiguity
- No money
- Gaps in membership
- Not taking strong role in state
- Limited time of members
- Enhanced representation of professionals
- Few outcomes
- No statewide DPAC recognition
- Our vision is “invisible”
- Few meetings
- Vague leadership
- Too few members
- Not working with other organizations that share goals
- Need better times for consumers to meet
- Increasing needs as resources become limited
- Not able to get word out about diabetes

## **Opportunities**

- Congregate even more diversity of backgrounds and personal
- Cohesive messages through out State of Michigan
- Coalition building for change (access, practice, reimbursement of prevention)
- Electronic communication
- Collaboration
- One big idea
- Work w/ consumers, providers of care and supplies
- Showing outcomes of initiatives
- Set tune of diabetes for the State of Michigan
- Assist with fundraising and grant writing for state local projects
- Growing public awareness about implications of diabetes – epidemic, cost of management
- Enhancing DPAC role in health communications for both professionals and consumers
- Need to ID what will not be done without DPAC
- Recruitment/member care

## **Threats**

- Budgetary constraints
- Time commitment required given voluntary basis on participation
- Staff-member turnover
- Michigan economy
- Funding
- Loss of DON representation
- Not having reps from key organizations
- Increasing needs
- Inability of legislators and others to understand long term vs. cost
- Saving related to both primary and secondary prevention
- Money, apathy, communication down
- No understanding of public/
- Easy to get lost with all that goes on especially that DPAC is not a strong voice in the state
- No understanding of public/legislators of public health/ and prevention